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The Beryl Institute Certified Patient Experience Professional Sample Questions (Q88-Q93):

NEW QUESTION # 88

Which practice BEST suggests an organization 's commitment to providing care that is patient- and family- centered?

- A. Extending visitation hours for critically ill patients
- B. Preserving patient confidentiality with a code word
- C. Ensuring employee participation on patient experience quality committees
- D. Addressing the patient ' s definition of family

Answer: D

Explanation:

This question aligns with Partnership and Advocacy , which emphasizes respecting and incorporating the patient's preferences, values, and support systems into care delivery. Option B is correct because recognizing and honoring the patient's own definition of family is a foundational principle of patient- and family-centered care. CPXP frameworks stress that "family" is defined by the patient, not the organization, and may include non-traditional or non-biological relationships. This practice demonstrates respect, inclusivity, and partnership. While options A, C, and D are valuable practices, they are more operational or situational and do not directly reflect the core principle of honoring patient voice and choice. By acknowledging who the patient identifies as family,

organizations foster trust, improve communication, and ensure care aligns with the patient's social and emotional support system.

NEW QUESTION # 89

Which communication framework is BEST utilized to frame crucial conversations between care team members?

- A. LAST
- B. ADKAR
- C. REDE
- **D. SBAR**

Answer: D

Explanation:

This question aligns with Partnership and Advocacy, specifically effective communication among care team members to ensure safe, coordinated, and patient-centered care. Option D (SBAR) is correct because it is a widely used, structured communication framework designed for clear, concise, and standardized information exchange between healthcare professionals. SBAR stands for Situation, Background, Assessment, and Recommendation, and is especially effective during critical conversations such as handoffs, escalations, or urgent updates. Option A (ADKAR) is a change management model, Option B (LAST) is used for service recovery communication with patients, and Option C (REDE) focuses on patient-provider relationship building. CPXP principles emphasize that structured communication tools like SBAR improve clarity, reduce errors, and enhance teamwork, ultimately improving patient safety and experience.

NEW QUESTION # 90

What do patient feedback measures capture patient perceptions of?

- **A. What and how frequently things happened**
- B. Where and how frequently things happened
- C. Where and when things happened
- D. What and when things happened

Answer: A

Explanation:

This question aligns with Measurement and Analysis, focusing on how patient experience data is captured and interpreted. Patient feedback measures, such as surveys (e.g., HCAHPS), are designed to capture patients' perceptions of what occurred during their care and how often those events happened. Therefore, Option A is correct. These measures focus on frequency-based questions like "How often did nurses listen carefully?" rather than exact timing or location. This approach provides standardized, comparable data that reflects consistency of care delivery. Options B, C, and D emphasize time or location, which are not the primary focus of patient perception surveys. CPXP principles highlight that understanding both what happened and the consistency of those experiences is essential for identifying improvement opportunities and enhancing patient-centered care.

NEW QUESTION # 91

Which data visualization illustrates the impact of process change to staff related to patient experience improvement efforts?

- **A. Run charts**
- B. Pie charts
- C. Bar graphs
- D. Box and whisker diagrams

Answer: A

Explanation:

This question aligns with Measurement and Analysis, particularly the use of data visualization to demonstrate improvement over time. Run charts (Option A) are the most appropriate tool because they display data points in chronological order, allowing staff to see trends, shifts, and the direct impact of process changes over time. CPXP principles emphasize that run charts are especially effective in quality improvement because they make it easier to identify whether changes lead to sustained improvement. In contrast, bar graphs (B) compare categories, pie charts (C) show proportions, and box-and-whisker plots (D) display distribution and variability—none of which clearly show change over time. Run charts help

engage staff by visually connecting their actions to outcomes, reinforcing accountability and supporting continuous improvement in patient experience.

NEW QUESTION # 92

Which of the following is a method of qualitative analysis?

- **A. Comparative analysis**
- B. Constructive analysis
- C. Comprehensive analysis
- D. Connective analysis

Answer: A

Explanation:

This question aligns with Measurement and Analysis, particularly qualitative data analysis techniques.

Comparative analysis (Option C) is a recognized qualitative method used to identify patterns, similarities, and differences across data sources, such as interview transcripts, focus group responses, or patient comments. It helps uncover themes and insights that explain patient experiences and perceptions. Options A (constructive), B (connective), and D (comprehensive) are not standard qualitative analysis methodologies in CPXP or research practice. CPXP principles emphasize that qualitative analysis methods like comparative analysis are essential for interpreting narrative data, understanding patient perspectives, and identifying root causes behind experience outcomes. These insights complement quantitative data and support more targeted, patient-centered improvement strategies.

NEW QUESTION # 93

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They perceive the communication experience CPXP in terms of how quickly a screen updates or how much delay is present on a phone call, Over the years I've noticed that when a CPXP Reliable Dump problem occurs, people first tend to blame the technology they understand the least.

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